

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212546665																		
1.) CORPORATION NAME: TWCC Holding Corp. <div style="float: right; text-align: right;">DUE DATE: 12/31/2012</div>																				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802 <div style="float: right; text-align: right;">SCC ID NO: 00390278</div>																				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY		5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000														
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COMMON	1,000																			
4.) STATE OR COUNTRY OF INCORPORATION: VA																				
6.) PRINCIPAL OFFICE ADDRESS: <div style="text-align: center;">ADDRESS: 300 INTERSTATE NORTH PKWY SE</div> <div style="text-align: center;">CITY/ST/ZIP: ATLANTA, GA 30339</div>																				
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.																				
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NAME:	R PERLEY MCBRIDE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/AS		
ADDRESS:	300 INTERSTATE NORTH PARKWAY		
CITY/ST/ZIP/CO:	ATLANTA, GA 30339		
NAME:	GARY SAIDMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/AS		
ADDRESS:	300 INTERSTATE NORTH PARKWAY		
CITY/ST/ZIP/CO:	ATLANTA, GA 30339		
NAME:	W SCOTT SEELEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/S/T		
ADDRESS:	C/O NBC UNIVERSAL		
CITY/ST/ZIP/CO:	30 ROCKEFELLER PLAZA NEW YORK, NY 10112		
NAME:	GABRIELA KORNZWEIG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	C/O NBC UNIVERSAL		
CITY/ST/ZIP/CO:	100 UNIVERSAL CITY PLAZA UNIVERSAL CITY, CA 91608		
NAME:	KEVIN LORD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	HR STEERING COM		
ADDRESS:	30 ROCKEFELLER PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10112		
NAME:	DEVIN O'REILLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	HR STEERING COM		
ADDRESS:	111 HUNTINGTON AVE		
CITY/ST/ZIP/CO:	BOSTON, MA 02110		
NAME:	STEVE CAPUS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	30 ROCKEFELLER PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10112		
NAME:	STEPHEN PAGLIUCA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	111 HUNTINGTON AVE		
CITY/ST/ZIP/CO:	BOSTON, MA 02110		
NAME:	David W Kenny	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	C/P		
ADDRESS:	300 Interstate North Parkway SE		
CITY/ST/ZIP/CO:	Atlanta, GA 30339		
NAME:	Chris Walters	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	100 Universal City Plaza		
CITY/ST/ZIP/CO:	Universal City, CA 91608		
NAME:	Jill Greenthal	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	c/o Blackstone Management Associates V, LLC		
CITY/ST/ZIP/CO:	345 Park Avenue, 31st Floor New York, NY 10154		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Blair Hendrix DIRECTOR c/o Bain Capital Partners, LLC 111 Huntington Avenue Boston, MA 02110	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Andy Miller DIRECTOR 300 Interstate North Parkway SE Atlanta, GA 30339	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Vivian Schiller DIRECTOR 30 Rockefeller Plaza New York, NY 10112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Kearnon O'Molony DIRECTOR 300 Interstate North Parkway SE Atlanta, GA 30339	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GABRIELA KORNZWEIG SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GABRIELA KORNZWEIG, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	12/3/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			